8871 (July 2000)

Political Organization

Notice of Section 527 Status OMB No. 1545-1693 Department of the Treasury Internal Revenus Service General Information Employer identification number 35 :6043509 Name of organization INDIANA HEALTH CARE POLITICAL ACTION COMMITTEE 1 Majling address (P.O. Box or number street, and room or suite number) $\stackrel{\cdot}{L}$ N CAPITOL SUITE 1115 City of town state, and ZIP code INDIANAPOLIS IN 46204 E-mail address of organization inca@ihca.org Custodian's address 4a Name of custodian of records SAME AS ABOVE INDIANA HEALTH CARE ASSOCIATION Contact person's address SAME AS ABOVE Name of contact person TAMARA NOEL Business address of organization (if different from mailing address shown above). Number, street, and room or suite number City or town, state, and ZIP code Purpose Describe the purpose of the organization TO ASSIST MEMBERS IN DELIVERING QUALITY LONG-TERM CARE FOR INDIANA RESIDENTS. POLITICAL CONTRIBUTIONS MADE TO PROMOTE QUALITY CARE THROUGH EDUCATION, INFORMATION, AND ADVOCACY. List of All Related Entities (see instructions) **Bc** Address 8b Relationship 8a Name of related entity SAME AS ABOVE PARENT INDIANA HEALTH CARE ORGANIZATION ASSOCIATION SAME AS ABOVE PROFIT INDIANA HEALTH CARE SUBSIDIARY SERVICE CORP SAME AS ABOVE NON-PROFIT INDIANA HEALTH CARE SUBSIDIARY FOUNDATION PECEIVED AUG 01 2000 OGDEN, UT

9a Name LEE MARCHANT	9b Title	Compensated Employees (see instructions) 9c Address
LEE MARCHANT	CTTA TIMEAN	
THE WEST CHAIL	CHAIRMAN	SAME AS FRONT
STEVE BEEBE	TREASURER	SAME AS FRONT
ARTHUR LOGSDON	DIRECTOR	BAME AS FRONT
VINCE MCGOWEN	DIRECTOR	SAME AS FRONT
	}	
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St. S	eclare that the organization named a examined this notice, including actes.	in Part I is to be treated as an organization described in section 527 of the Internaccompanying schedules and statements, and to the best of my knowledge and ballet
Sign Signature of authorized		July 28, 2000 Date Form 8871 (7-2000